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ABSTRACT

This is a workshop training manual designed to help higher education institutional teams develop policies and programs aimed at preventing the abuse of alcohol and use of illegal drugs on their campuses. Three circular diagrams display the community groups that can be involved in drug abuse prevention, higher education institutions that play a part, and a planning model, respectively. Several items address facts about college drug use including a participant questionnaire, data on why non-users stopped using drugs of various types, and an athlete user profile. Standards for the Network of Colleges and Universities Committed to the Elimination of Drug and Alcohol Abuse and guidelines for beverage alcohol marketing on college and university campuses are reproduced. A list of roadblocks to creativity, eight legal recommendations, and evaluation tips assist the participant to begin to develop an action plan. Two work sheets, on missing components and obstacles to implementation, follow. Several items address chemical health: a list of drug use situations to be evaluated, recommendations concerning standards, and suggestions for situations for role playing. Included in a back cover pocket are three work sheets: an evaluation form, an opportunities for planning grid and an action plan. (JB)

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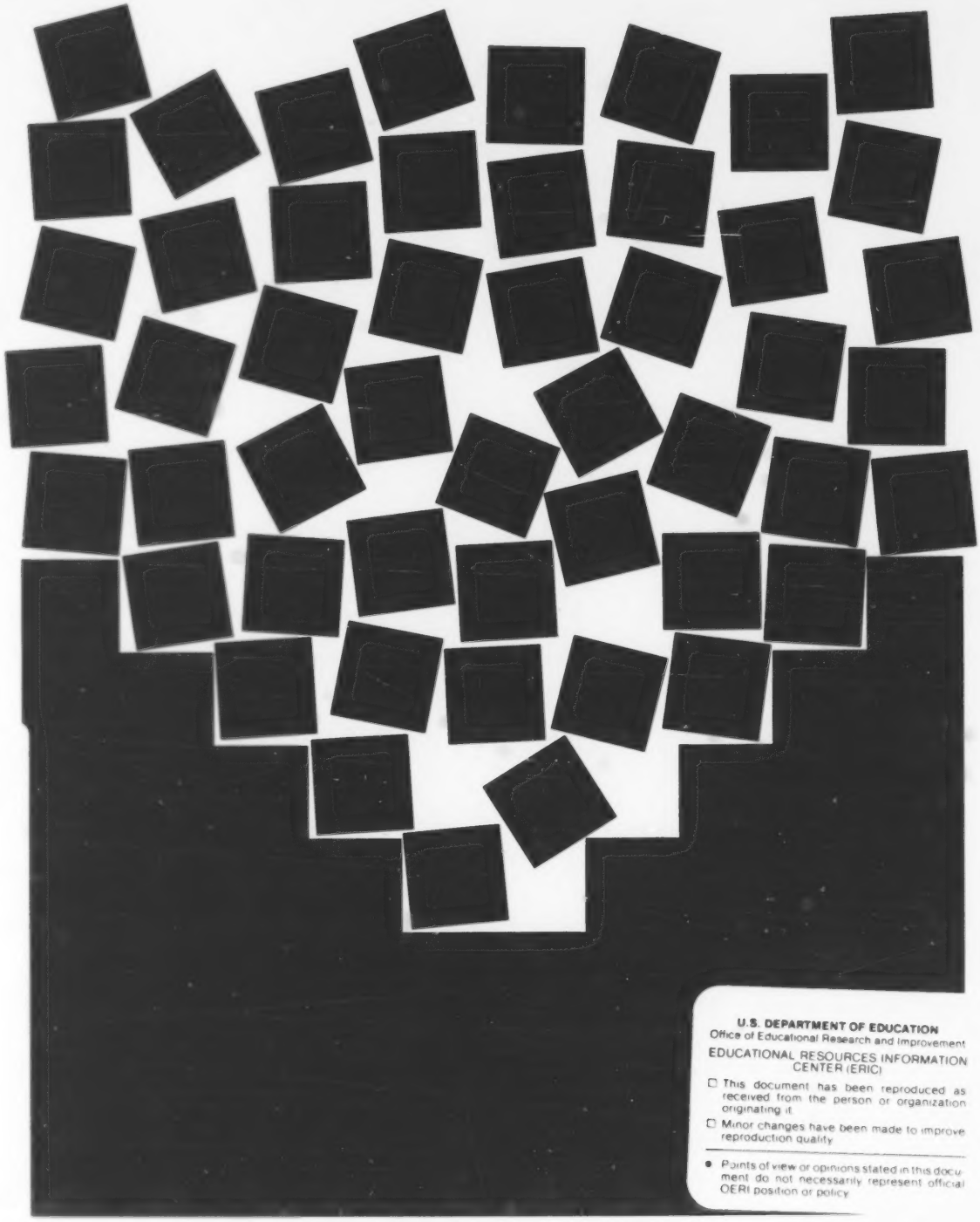

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Policies and Programs for the 1990's

A Team Approach to the Prevention of Alcohol, Other Drug, and Traffic Safety Problems in Higher Education

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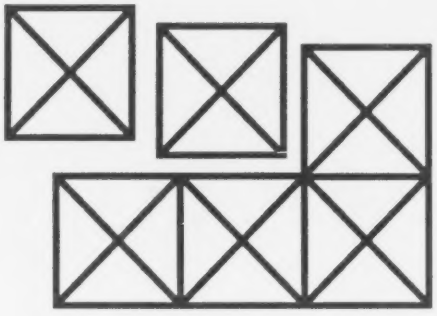


Policies and Programs for the 1990's:

A Team Approach to the Prevention of Alcohol, Other Drug and Traffic Safety Problems in Higher Education

1989 Workshops

Sponsored by:
U.S. Department of Transportation
National Highway Traffic Safety Administration

U.S. Department of Education
Office of Educational Research and Improvement

U.S. Department of Health and Human Services
Office for Substance Abuse Prevention

Conducted by:
Hazelden Services, Inc.
Health Promotion Services

Policies and Programs for the 1990's: A Team Approach to the Prevention of Alcohol, Other Drug and Traffic Safety Problems in Higher Education

1989 Regional Workshops Goals and Objectives

The regional workshops are designed to help each institutional team develop an action plan to achieve the following goals and objectives on their campus:

Goals

- Develop policies and programs aimed at preventing the use of alcohol and other illegal drugs for those under 21, and the abuse of alcohol and the use of all illegal drugs by all members of the campus community.

- Promote a healthy educational environment and a safe driving and walking environment in and around campuses by eliminating the dangers caused by the illegal use and abuse of drugs and alcohol.

Objectives

As a result of participating in this workshop, each team will be able to:

- Identify short and long-term problems and develop an action plan for dealing with the illegal use and abuse of alcohol and other drugs.

- Assess needs for program development and identify obstacles to implementation and evaluation.

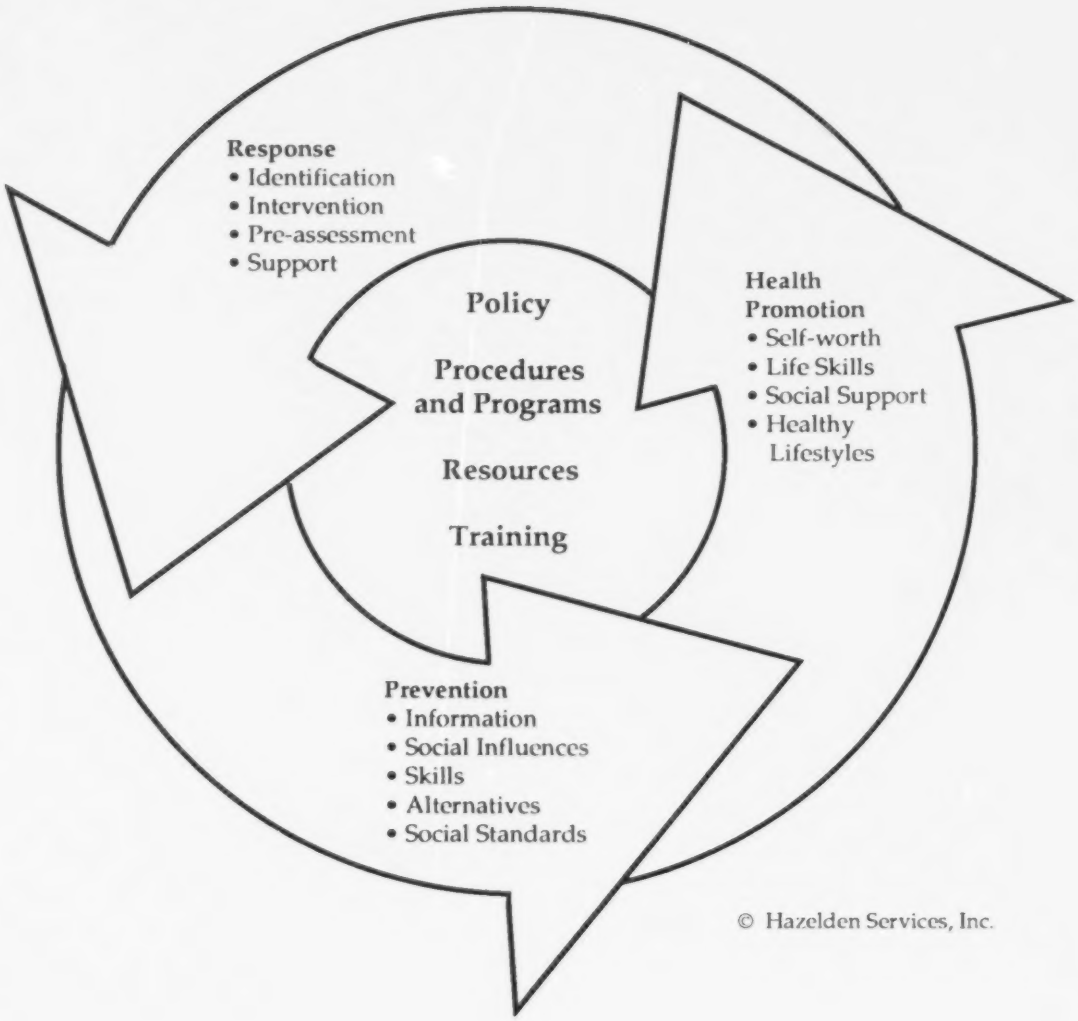
- Describe specific strategies and projects currently operating on campus and in the broader community.

- Work together to implement specific ongoing efforts identified in the action plan within an established timeframe.

Community Focus for Chemical Health

Higher Education Institutions

Higher Education Planning Model



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Colleges and Chemical Use

Instructions: Circle the response which most clearly indicates the way you feel about each item. You will be asked to share your responses in a small group discussion when everyone has completed this exercise.

SA = Strongly Agree **U = Undecided** **SD = Strongly Disagree**
A = Agree **D = Disagree**

1. Most alcohol use by college students does not result in problem behavior.	SA	A	U	D	SD
2. Colleges and universities must first consider liability risks in establishing policies concerning alcohol and other drugs.	SA	A	U	D	SD
3. Fraternities and sororities account for a majority of alcohol and other drug related problems on campus.	SA	A	U	D	SD
4. Clear institutional policies designed to reduce alcohol and other drug use can have a significant impact on student behavior.	SA	A	U	D	SD
5. Preventing alcohol use by students under 21 is both unachievable and undesirable.	SA	A	U	D	SD
6. Most college faculty and other staff have the knowledge and the skills to effectively respond to student alcohol and other drug user problems.	SA	A	U	D	SD
7. Commuter students face the greatest risks for drinking and driving related problems of any student group.	SA	A	U	D	SD
8. Colleges have a clear responsibility to establish and enforce strict policies regarding sale of alcohol on campus including stadium, arena, and auditorium events.	SA	A	U	D	SD
9. Athletic departments have unique concerns and require specialized prevention programs.	SA	A	U	D	SD
10. The most effective approach to prevent student alcohol and other drug use problems includes employee assistance and health promotion services for faculty and staff.	SA	A	U	D	SD

Overview of College Student Alcohol and Other Drug Use

Many people have been reluctant to accept the fact that student use of alcohol and other drugs is as widespread as a number of sources suggest. Others are so concerned over the recent attention given to cocaine and other drug use that they are relieved when young people are "just drinking". But surveys, student comments, observations, and intuition all suggest otherwise. What's really happening? Is it just a few making all the headlines? How serious are chemical use problems? How widespread?

Although local statistics are often not available, major national studies on alcohol and other drug use address these questions. Furthermore, most local campus communities have been found to closely parallel the national statistics. The national studies graphically tell this story:

Alcohol
Alcohol is clearly the drug of choice for college students.

- Seventy-seven percent of our nation's college students report that they currently (during the last 30 days) use alcohol.*
- Forty-three percent of college students report drinking to intoxication within the two weeks prior to the time they were surveyed. Intoxication is defined as five drinks in a row on a single occasion.*
- Over 50% of college students report driving after drinking at least once in the past year.**

Parents, college administrators, and others who are aware of these statistics are concerned. The large number of under-age students who drink alcohol concern them, and the last two statistics, driving after drinking and drinking to intoxication, are especially disturbing. Traffic accidents are the greatest single cause of death among young people, and alcohol use causes over 50% of these accidents.

Young people who drink to intoxication are at high risk for other problems as well. As a result of impaired decision-making abilities, intoxicated young people are injured and killed in boating, swimming, diving, skiing, and other sporting accidents each year. Decisions regarding sexual behavior are often made under the influence of alcohol — certainly a dynamic in the million-plus young people who become pregnant each year, and the increasing number of date rape cases being reported on campuses throughout the country. The effects of alcohol and other drug use, such as hangovers, pre-occupation with parties and use, and fatigue interfere with academic performance and performance in other college fine arts and athletic activities.

Other Drugs

Obviously, alcohol is the major drug of choice for college students. However, the studies also show that we do have cause to be concerned about drugs other than alcohol:*

- Twenty-three percent of college students report that they currently smoke tobacco (during the last 30 days).
- Seventeen percent of college students report that they currently use marijuana (during the last 30 days).
- Two percent of college students report that they use stimulants (during the last 30 days).
- Four percent of college students report that they currently use cocaine (during the last 30 days).

A 1984-85 NCAA-sponsored study of "Alcohol, Drug, and Tobacco Use Among College Athletes" found the following:***

- Alcohol is the most widely and frequently used drug.
- Athlete drug use is similar to college student drug use.
- Athlete drug use is social and experimental.
- Athletes who use drugs are more likely to use them with friends than with teammates.
- Athletes generally obtain drugs from sources outside the athletic program.
- Athletes begin using drugs in high school or earlier.
- Decisions not to use drugs are personal; they are not based on coaches, rules, or laws.

* *Monitoring The Future*, conducted by the Institute for Social Research at the University of Michigan for the National Institute of Drug Abuse

** Hazelden Foundation surveys of college students, 1985-1988.

*** NCAA sponsored study of Alcohol, Drug, and Tobacco Use Among College Athletes in 1984-1985.

Comparison of Thirty-Day Prevalence of Drug Use

	High School Seniors* Class 1988	College Students ** in 1988
Marijuana/Hashish	18	16.8
LSD	1.8	1.1
Cocaine	3.4	4.2
Crack	1.6	0.5
Sedatives	1.4	0.6
Alcohol	64	77
Five drinks or more in a row in the last two weeks	35	43.2
Cigarettes	28.7	22.6

* Random sample of high school seniors across U.S.; N=16.300.

** College students one to four years beyond high school who participated in earlier studies; Wtd N=1,310.

Source — Monitoring the Future: A Continuing Study of the Lifestyles and Values of Youth, University of Michigan Institute for Social Research, released 1989.

For Non-Users, Response to the Question:
"If you do not use or have stopped using____, mark the main reason why."

Response Choice	Anabolic Steroids	Cigarettes	Smokeless Tobacco	Alcohol	Marijuana Hashish	Cocaine	Barbs/ Tranqs	Amphe-tamines
No need to use it	—	—	—	—	—	—	37%	37%
I recovered from my injury or illness	4%	—	—	—	—	—	0	0
Concerned about what it might do to my health	25%	35%	15%	28%	31%	32%	12%	13%
It's against my beliefs	24%	10%	6%	18%	19%	20%	14%	15%
Others would disapprove	1%	1%	2%	1%	0	0	0	0
It's hard to get	1%	—	—	1%	1%	2%	1%	0
I had a bad experience with it	0	—	—	3%	1%	1%	0	0
I didn't get the desired effect	0	—	—	2%	2%	1%	0	1%
Was afraid of being caught	0	—	—	0	2%	1%	0	0
Coach's rules	1%	0	0	2%	4%	4%	0	0
No desire to experience the effects	45%	25%	35%	26%	24%	32%	32%	30%
I don't like it	—	29%	42%	20%	14%	6%	4%	4%
I forget to take it	—	—	—	—	—	—	—	—
Because it is illegal	—	—	—	—	2%	2%	—	—

* Percentages do not total 100% due to rounding.

— Indicates that the response choice was not applicable (and therefore not presented) for that drug.

+ Adapted from the NCAA sponsored study of Alcohol, Drug, and Tobacco Use Among College Athletes, conducted by Michigan State University, 1984-85.

User Profile: Athlete Variables by Chemicals Used*

	NUMBER OF INJURIES	GRADUATING FROM COLLEGE	BECOMING A PRO-ATHLETE	MAKE LOTS OF MONEY	NUMBER OF EVENINGS OUT	CHURCH ATTENDANCE	IMPORTANCE OF RELIGION
Cigarettes	higher	NS	NS	NS	higher	NS	NS
Smokeless Tobacco	higher	lower	higher	NS	higher	NS	NS
Alcohol	NS	higher	lower	lower	higher	lower	lower
Marijuana/Hashish	NS	NS	NS	NS	higher	lower	lower
Cocaine	NS	NS	NS	higher	higher	lower	lower
Hallucinogens	NS	NS	NS	NS	higher	lower	lower
Amphetamines	higher	NS	NS	NS	higher	lower	lower
Barbiturates/Tranquilizers	NS	higher	NS	NS	higher	NS	NS
Anabolic Steroids	higher	NS	higher	higher	NS	NS	NS

* NCAA sponsored study of Alcohol, Drug, and Tobacco Use Among College Athletes, conducted by Michigan State University, 1984-85.

Network of Colleges and Universities Committed to the Elimination of Drug and Alcohol Abuse

Standards

The Standards for the Network to Promote Drug-Free Colleges and Universities define criteria for institutional membership in the Network. The Standards are organized within the four areas of Policy, Education, Enforcement, and Assessment.

A. Policy

Network members shall. . .

- Promulgate policy, consistent with applicable federal, state and local laws, using such means as the student and faculty handbooks, orientation programs, letters to students and parents, residence hall meetings, and faculty and employee meetings.
- Develop policy which addresses both individual behavior and group activities.
- Define the jurisdiction of the policy carefully to guarantee the inclusion of all campus property. Apply campus based standards to other events controlled by the institution.
- Stipulate guidelines on marketing and hosting events involving students, faculty, staff and alumni at which alcoholic beverages are present.
- State institutional commitment to the education and development of students, faculty, and staff regarding alcohol and other drug use.

B. Education Programs

Network members shall. . .

- Provide a system of accurate, current information exchange on the health risks and symptoms of alcohol and other drug use for students, faculty, and staff.
- Promote and support alcohol-free institutional activity programming.

- Provide, with peer involvement, a system of intervention and referral services for students, faculty, and staff.

- Establish collaborative relationships between community groups and agencies and the institution for alcohol and drug related education, treatment, and referral.

- Provide training programs for students, faculty, and staff to enable them to detect problems of alcohol abuse and drug use and to refer persons with these problems to appropriate assistance.

- Include alcohol and other drug information for students and their family members in student orientation programs. The abuse of prescription and over-the-counter drugs should also be addressed.

- Support and encourage faculty in incorporating alcohol and other drug education into the curriculum, where appropriate.

- Develop a coordinated effort across campus for alcohol and other drug related education, treatment, and referral.

C. Enforcement

Network members shall. . .

- Publicize all alcohol and other drug policies.

- Consistently enforce alcohol and other drug policies.

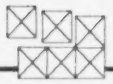
- Exercise appropriate disciplinary actions for alcohol and/or other drug policy violations.

- Establish disciplinary sanctions for the illegal sale or distribution of drugs; minimum sanctions normally would include separation from the institution and referral for prosecution.

D. Assessment

Network members shall. . .

- Assess the institutional environment as an underlying cause of drug abuse.
- Assess campus awareness, attitudes, and behaviors regarding the abuse of alcohol and other drugs and employ results in program development.
- Collect and use alcohol and drug related information from police or security reports to guide program development.
- Collect and use summary data regarding health and counseling client information to guide program development.
- Collect summary data regarding alcohol and drug related disciplinary actions and use it to guide program development.



The Inter-Association Task Force on Campus Alcohol and Other Substance Abuse Issues *The Guidelines for Beverage Alcohol Marketing on College and University Campuses*

1. Alcohol beverage marketing programs specifically targeted for students and/or held on campus should conform to the code of student conduct of the institution and should avoid demeaning sexual or discriminatory portrayal of individuals.

2. Promotion of beverage alcohol should not encourage any form of alcohol abuse nor should it place emphasis on quantity or frequency of use.

3. Beverage alcohol (such as kegs or cases of beer) should not be provided as free awards to individual students or campus organizations.

4. No uncontrolled sampling as part of campus marketing programs should be permitted and no sampling, or other promotional activities, should include "drinking contests."

5. Where controlled sampling is allows by law and institutional policy, it should be limited as to time and quantity. Principles of good hosting should be observed including availability of alternative beverages, food and planned programs. The consumption of beer, wine or distilled spirits should not be the sole purpose of any promotional activity.

6. Promotional activities should not be associated with otherwise existing campus events or programs without prior knowledge and consent of appropriate institutional officials.

7. Display or availability of promotional material should be determined in consultation with appropriate institutional officials.

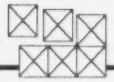
8. Informational marketing programs should have educational value and subscribe to the philosophy of responsible and legal use of the products represented.

9. Beverage alcohol marketers should support campus alcohol awareness programs that encourage informed and responsible decisions about the use or non-use of beer, wine or distilled spirits.

10. If permitted, beverage alcohol advertising on campus or in institutional media, including that which promotes events as well as product advertising, should not portray drinking as a solution to personal or academic problems of students or as necessary to social, sexual or academic success.

11. Advertising and other promotional campus activities should not associate beverage alcohol consumption with the performance of tasks that require skilled reactions such as the operation of motor vehicles or machinery.

12. Local off-campus promotional activities, primarily directed to students, should be developed with the previous knowledge of appropriate institutional officials.



Roadblocks to Creativity*

Perceptual Blocks

- Stereotyping
- Difficulty in isolating the problem
- Delimiting the problem area too closely
- Inability to see the problem from various viewpoints, interests, constituencies
- Saturation
- Failure to use all sensory inputs

Emotional Blocks

- Feel you are the only one who feels this way
- Fear of taking a risk
- Distaste of chaos
- Judgment rather than generation of ideas
- Inability to incubate

Cultural and Environmental Blocks

- Cultural Blocks
  - "fantasy and reflection are a waste of time; lazy"
  - "playfulness is for children only"
  - "problem-solving is a serious business"
  - "reason, logic, numbers, practicality, utility = good"
  - "feeling, intuition, qualitative judgments, pleasure = bad"
  - "tradition is preferable to change"
  - "any problem can be solved by scientific thinking and money"
  - taboos
- Environmental Blocks
  - lack of cooperation and trust among colleagues
  - autocratic boss who values only personal ideas
  - distractions
  - lack of support to bring ideas into action

Intellectual and Expressive Blocks

- We tend to follow a habit pattern in selecting problem-solving strategies
- Lack of, or incorrect, information
- Inadequate language skill to express and record ideas

*Adapted by David S. Anderson from James L. Adams' Conceptual Blockbusting: A Guide to Better Ideas

Considerations From a Legal Perspective*

Several recommendations emerge from the legal perspective:

1. Think about *foreseeability* — if you can foresee that something might cause a problem, then you need to do something about it.

2. Think about the theme of *"duty to care"* — this essentially implies that colleges have a responsibility to demonstrate that they care — through their actions, in their policies, and through their education programs.

3. Think about what you are *actually willing to do* — you should not have a policy that you do not intend to enforce.

4. Have *consistency* in the policy and procedures — consistency with itself and with the institutional mission.

5. Have *concurrence* with the state and local laws.

6. Have *good information dissemination* so that others — faculty, students, staff — know what the standards are.

7. Have *updating and continuous review* — one of the biggest concerns is with using old information; some of the old familiar themes aren't accurate now. This means "keep up to date"!

8. Have *detailed procedures*, and have these checked to be sure that they are actually implemented.

* These recommendations are offered as a starting point, and should not be interpreted as legal advice. The specific interpretation of these for your campus' unique situation and needs should be done in conjunction with your campus' legal counsel.

David S. Anderson, 1989

Tips For Conducting Evaluation

Prepare

Begin evaluation at the onset of the project.
Review goals of project, outcome measures — link to evaluation.
Know the goals of the evaluation — be realistic!
Examine what needs to be done — is this reasonable?
Focus on process and on content.
Acknowledge who the audience is for the evaluation.
Anticipate potential obstacles to implementing the evaluation findings.
Be creative and innovative.
Use a variety of different methods; then triangulate.
Initiate detailed planning process early.
Build a data collection plan.
Keep evaluation involved in all aspects of project planning.

Conduct

Allow reasonable time to do this — including reflection and writing.
Be reasonable with what you expect to be able to analyze.
Make involvement in the evaluation process interesting.
Make the sample appropriate.
Encourage student research projects.
Do not intrude on program activities.
Perform as often as needed and reasonable.
Use information as feedback to program implementation.

Synthesize/Write

Remember the audience.
Write what the reader will read and use.
Get input on the draft content and wording.
Specify research design and rationale.
Cite implementation, problems, biases.
Document validity, reliability.

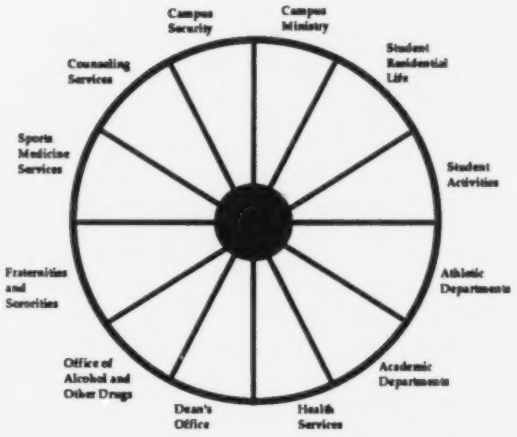
Distribute

Prepare executive summary as well as detailed report.
Use informal and formal distribution channels.
Be neutral, and be perceived as being neutral.
Watch the timing for the release of the report.

David S. Anderson, 1989

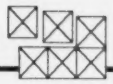
Missing Components Worksheet

Higher Education Institutions



Higher Education Planning Model

Consider both the components within the Higher Education Institutions circle and the Higher Education Planning Model as you identify weak or missing components on your campus.



Obstacles to Program Implementation Worksheet

Identify obstacles to effective programming on your campus.

Chemical Health*

The use of chemicals by most of us in our society is almost a daily reality, and the terms "drug", "chemical", and "substance" are often used interchangeably. Chemicals include over-the-counter medications, prescription pharmaceuticals, and illicit substances. They also include alcohol, nicotine, and caffeine; chemicals that often do not come to mind in a conversation about drug abuse.

For the most part, chemicals can potentially improve our health and enrich our lives. Chemicals protect us from disease, guard against infection, speed the recovery from injury, comfort the terminally ill, and are a part of the celebration of religious or other special events.

However, many chemicals are mind-altering and also have the potential to cause problems. In our society, alcohol, tobacco, prescription, non-prescription, and illegal chemicals such as marijuana and cocaine are a regular part of life for many people. We cannot avoid deciding how, when, where, or if we should use any chemical.

Chemical Health

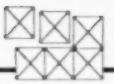
The concept of chemical health is a new, positive, and comprehensive response to chemical-use issues, questions, and problems. It is seen as an important component of general health.

> *Chemical health is a state of physical, emotional, spiritual, and social well-being that results in responsible decisions about chemical use and non-use.*

The concept recognizes that the question of alcohol and other drug use is more complex than simply use verses non-use. Chemical health means that there is such a thing as healthy and appropriate use as well as non-use.

By failing to affirm the healthy and appropriate use of alcoholic beverages within the context of chemical health, we live with the fact that the most neglected group in our society is not the nondrinkers, but the drinkers — the majority. For them, society has few guidelines as to when the use of alcohol is healthy versus unhealthy, appropriate versus inappropriate, safe versus dangerous, necessary versus unnecessary, and acceptable versus unacceptable.

* From the *"It's Time to Talk"* program published by Hazelden Health Promotion Services.



Examples of people who experience chemical health include a person with heart problems who takes prescribed valium, a person who is chemically dependent who abstains from mind-altering chemicals, and a person who uses alcohol in a legal, moderate, appropriate, problem-free way.

Often, the reluctance of many faculty members, coaches, parents, and other adults to discuss the use and non-use of alcohol with young people can be traced to a feeling of confusion or discomfort over their own personal use. It is important to make clear to all adults that they can be positive role models for young people by choosing not to use alcohol or by using it legally and appropriately.

Chemical Use Problems

Some people, however, experience a variety of harmful consequences as a result of inappropriate use of alcohol and other mind-altering chemicals, only one of which is dependency or addiction.

> *Chemical-use problems are physical, spiritual, emotional, or social problems that result directly from a person's use of chemicals or indirectly from another person's use.*

Chemical dependency is one example of a chemical-use problem. Other chemical-use problems include drunken or impaired driving, mixing prescriptions, family problems resulting from chemical use, the use of drugs to improve athletic performance, and the use of illegal drugs, all of which may or may not involve dependency.

Each of us brings different experiences, feelings, thoughts, and attitudes about chemical use to our families, teams, community, and workplace. Recognizing that chemical use is a significant part of life in our culture is important to us all. Equally important is the realization that not everyone believes the same things about chemical use. Often, the attitudes of people around us influence our decisions to use or not use a chemical.

Within the context of chemical health, families, teams, and communities can assist each other in preventing problems, as well as assist those experiencing chemical use problems. Understanding our own thoughts, feelings, and beliefs will help us make the best decisions for ourselves.

Chemical Use Situations

A number of situations that involve actual or intended chemical use are described below. For each situation, choose from the words provided those that you feel best describe the use. Use no more than three words per situation. You will be asked to share your responses in a small group when everyone has completed this exercise.

Healthy	**Wise**	**Legal**	**Appropriate**	**Responsible**	**Safe**	**Good**	**Necessary**
Unhealthy	**Foolish**	**Illegal**	**Inappropriate**	**Irresponsible**	**Dangerous**	**Bad**	**Unnecessary**

1. The residence hall directors meet weekly off-campus to discuss programming over pizza and a pitcher or two of beer. _____
2. A student athlete uses steroids to help put on an extra 20 pounds. _____
3. A faculty member enjoys watching the evening news and having a drink before going to bed. _____
4. After drinking seven beers in less than two hours in a friends dorm room, a college student leaves the campus and drives back to his/her apartment. _____
5. A group of college students hold a "keg party" and advertise all the beer you can drink for $3.00. _____
6. Marijuana is smoked regularly by a small group of seniors to help them relax after every test. _____
7. Wine is served as part of a faculty luncheon meeting. _____
8. Two 21-year-old college students enjoy a few drinks together in their room after a night of studying. _____
9. Regularly after a Wednesday night class, a group of students gathers together to use cocaine near campus. _____
10. A faculty member joins several students for a beer after class. _____

After completing this exercise, discuss the following questions:

1. Was it easy to choose words that describe each situation?
2. What were the criteria or guidelines that you used to decide whether chemical use was appropriate, inappropriate, etc.?
3. What guidelines do you personally follow for the use and nonuse of chemicals?

Setting Standards for Chemical Health

As individuals, as groups of friends, as families, and as teams, our chemical health is dependent on our ability to set standards for chemical use and to live by them. Listed below are some suggestions for setting both personal and group standards for chemical use and non-use.

Suggested Standards*

1. The use of alcohol is a personal choice. No one should be pressured to drink or not to drink, or made to feel uneasy or embarrassed, because of a personal choice.

2. Alcohol is not essential for the enjoyment of family or social events, or for celebrating success.

3. Drinking should not be an activity for its own sake, but an adjunct to other activities.

4. The use of alcohol at luncheons or meetings during working hours or the class day should be discouraged. Many companies and institutions specifically prohibit the use of alcohol during the work or school day.

5. Excessive drinking that leads to intoxication is neither healthy, safe, nor socially acceptable.

6. Drunkenness should not be laughed at or taken lightly, but should be considered irresponsible behavior and could be indicative of possible personal problems.

7. The person responsible for setting up parties or social events is accountable for seeing that alcohol, if used, is used legally, moderately, and appropriately.

8. Illegal chemical use has specific risks and should be discouraged. Examples are: dosage, purity, criminal record, etc.

9. Everyone should know when to abstain from chemicals. Examples are:

    - while recovering from chemical dependency;
    - while taking certain medications;
    - while operating complex equipment — cars, motorcycles, lawn mowers, power tools, firearms, boats, etc.;
    - while engaged in athletics or physical activities, especially aquatics;
    - while pregnant or nursing a child;
    - when full cognitive functioning is needed — schoolwork, job, or athletic performance;
    - while doing anything that is more dangerous or less effective under the influence of alcohol.

10. Everyone should know their limits of moderation. How much a person can drink without becoming impaired or intoxicated depends upon several factors, including age, body weight, food eaten, gender, degree of fatigue, strength of drinks, and mental state.

* From the *"It's Time to Talk"* program published by Hazelden Health Promotion Services.

Setting Standards for Chemical Health

As individuals, as groups of friends, as families, and as teams, our chemical health is dependent on our ability to set standards for chemical use and to live by them. Listed below are some suggestions for setting both personal and group standards for chemical use and non-use.

Suggested Standards*

1. The use of alcohol is a personal choice. No one should be pressured to drink or not to drink, or made to feel uneasy or embarrassed, because of a personal choice.
   - What kinds of situations do adults experience in which they might feel pressure to use or not use chemicals?
   - Is this pressure any different for people of different ages?

2. Alcohol is not essential for the enjoyment of family or social events, or for celebrating success.
   - What does "not essential" mean?
   - Do you agree with the standard? Why or why not?

3. Drinking should not be an activity for its own sake, but an adjunct to other activities.
   - How do you feel in situations where drinking is the primary activity?
   - How can you make drinking or using chemicals not the primary activity at a party or other social event?

4. The use of alcohol at luncheons or meetings during working hours or the class day should be discouraged. Many companies and institutions specifically prohibit the use of alcohol during the work or school day.
   - What is your company's or institution's policy regarding alcohol use during the work day? Do you agree with it?
   - What effects of alcohol make this standard important?
   - What policies does your company or institution have for other chemical use, for example, cigarettes, coffee or illicit chemicals?

5. Excessive drinking that leads to intoxication is neither healthy, safe, nor socially acceptable.
   - Do you think people generally accept this standard?
   - How much alcohol is socially acceptable?
   - Should excessive drinking be tolerated?

6. Drunkenness should not be laughed at or taken lightly, but should be considered irresponsible behavior and could be indicative of possible personal problems.
   - What do you think about "drunk" jokes?
   - What is wrong with laughing at people who are drunk?

* From the *"It's Time to Talk"* program published by Hazelden Health Promotion Services.

7. The person responsible for setting up parties or social events is accountable for seeing that alcohol, if used, is used legally, moderately, and appropriately.
   - Is anyone else responsible?
   - Is it fair to make people responsible for each other in this way?
   - Do you think there could even be a legal responsibility?
   - How can we insure safety for those who overindulge?

8. Illegal chemical use has specific risks and should be discouraged. Examples are: dosage, purity, criminal record, etc.
   - What chemicals are illegal?
   - What are their risks?
   - Is it ever appropriate to use an illegal chemical?

9. Everyone should know when to abstain from chemicals. Examples are:
   - while recovering from chemical dependency;
   - while taking certain medications;
   - while operating complex equipment — cars, motorcycles, lawn mowers, power tools, firearms, boats, etc.;
   - while engaged in athletics or physical activities, especially aquatics;
   - while pregnant or nursing a child;
   - when full cognitive functioning is needed — schoolwork, job, or athletic performance;
   - while doing anything that is more dangerous or less effective under the influence of alcohol.
   - Do you think people abstain from chemical use at these times?
   - What would you say to a pregnant woman if you saw her drinking?
   - What other times is it important to abstain?

10. Everyone should know their limits of moderation. How much a person can drink without becoming impaired or intoxicated depends upon several factors, including age, body weight, food eaten, gender, degree of fatigue, strength of drinks, and mental state.
    - How do these factors affect an individual's limits of moderation?

Summary

Preventing alcohol and other drug use problems can begin in very small ways by first examining our own attitudes and decisions about chemical use. The standards suggested here can provide a framework within which to examine the use of alcohol and other drugs and the use of alcohol as part of family and social events.

Faculty members, parents, coaches, and other adults can encourage discussion, role-model healthy and responsible decisions about whether or not and how much to drink, as well as role-model consideration for those who choose not to drink, for those who have had difficulty with alcohol, and for those whose lives have been affected by dependency and other chemical-use problems. We can also be willing to talk to someone whose chemical use behavior is not consistent with the standards suggested earlier.

Situations

1. Three women students are worried about their friend. When they go out together, she often seems to have a drink in her hand and wants to stay at the bar long after the others want to leave. The students don't think she is doing well with her studies. She's a commuter student living at home with her parents. She works part time, and her course load seems heavy for her. It's been hard for her to make other friends.

2. A sophomore student seems to brag a lot to his fraternity brothers about where his parents live, about his possessions, etc. He seems to party frequently and fit studying in between. Last year he held a 3.0 G.P.A.; this semester at mid-terms, his grades are marginal. Some of the guys are starting to talk about how often he is getting drunk.

3. A group of alumni fans sneak a couple of wine skins full of brandy into the stadium. They had already been drinking before the football game and had become quite intoxicated, loud and boisterous. Nearby fans are being distracted and bothered by their behavior.

4. A freshman student talks to her roommate about having attended a party the night before during which she drank heavily, became intoxicated, and was raped later on by her date.

5. A faculty member observes three students smoking a joint on campus.

6. A student has reported three incidents of drinking parties on her/his floor with no apparent action taken.

About the Workshop Leaders

Hazelden Health Promotion Services, a department of the non-profit Hazelden Services, Inc., assists colleges and universities in their role in responding to student chemical use problems, preventing problems, and promoting health. Through consultation and training, Hazelden Health Promotion Services has worked with thousands of educators across the country concerned about the health choices their students are making.

Our goal is to help institutions and organizations develop and implement programs which help students stay healthy and make responsible decisions about chemical use and nonuse. Strategies include:

- assessing needs and evaluating existing programs
- conducting training sessions and workshops for faculty, students and staff
- providing consultation services to staff and faculty

For more information, please call or write:

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Minneapolis, Minnesota 55404-1597
612/349-4310
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(Outside Minnesota)

Roger H. Svendsen, M.S. is currently Program Development Manager for Hazelden Health Promotion Services. He was formerly the Minnesota State Drug Abuse Prevention Director, and has had extensive experience in assisting schools, colleges, and communities in planning, evaluating and implementing prevention and intervention programs. He has directed a community drug program and has been a teacher at the junior and senior high, college, and university levels.

He has authored several publications, including: The Student Assistance Program and Chemical Health — School Athletics and Fine Arts Activities.

David S. Anderson, Ph.D. is a substance abuse specialist in Washington, D.C. with major responsibilities as an Associate Research Professor at the Center for Health Promotion, George Mason University, Fairfax, Virginia. He has served as a college administrator for fifteen years, most recently as the Director of Residence Life at Ohio University in Athens, Ohio.

Alcohol and Other Drug Use In Higher Education Workshop Evaluation

Please help us by taking a few minutes to give your honest reactions to the workshop. Your responses will help us to improve future workshops.

1. I will be able to apply the information from this workshop in my job.

   a. Yes b. No

2. Please rate your overall satisfaction with this workshop.

   a. Very satisfied
   b. Mostly satisfied
   c. A little satisfied
   d. Not at all satisfied

The goals of the workshop were centered around the following objectives. Please answer the following questions on a scale of 4 to 1, in which 4 signifies strongly agreeing with the statement and 1 signifies strongly disagreeing with the statement:

I believe I am able to:

	Strongly Agree			Strongly Disagree
3. Assess needs for program development and identify obstacles to implementation and evaluation.	4	3	2	1
4. Describe specific strategies and projects currently operating on campuses and in the broader community.	4	3	2	1
5. Develop an action plan for dealing with the illegal use and abuse of alcohol and other drugs.	4	3	2	1
6. Work to implement specific ongoing efforts identified in the action plan within an established timeframe.	4	3	2	1

7. What did you like best about the workshop? _____

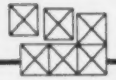
   _____

8. What did you like least about the workshop? _____

   _____

9. Other comments: _____

   _____



Opportunities for Programming

	Student Residential Life	Fraternity/ Sorority Programs	Stadium, Arena, Auditorium Events	Athletic Department	Campus Security Program	Student Health/ Counseling Services	Academic Depart-ments	Admissions/ New Student Orientation	Student Activities
POLICY									
EDUCATION									
ASSESSMENT									
ENFORCEMENT									

Hazelden Health Promotion Services

Action Plan*

Institution _____

Team Members _____

Objectives	Key Assumptions	Action Steps to Accomplish Objective	Timeline/ Benchmark	Resources/Cost	Person/Group Responsible

**Action plan format will serve as the basis for six month evaluations with teams.*

Policies and Programs for the 1990's
workshops are funded by:

U.S. Department of Transportation
(National Highway Traffic Safety Administration)

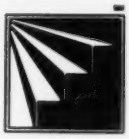
U.S. Department of Health and Human Services
(Office for Substance Abuse Prevention)

U.S. Department of Education
(Office of Educational Research and Improvement)

The workshops are planned and conducted by staff from Hazelden Health Promotion Services and special consultant, David S. Anderson, Ph.D. Specially selected campus program representatives will be featured.

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**



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